

REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/054,914
Confirmation Number	5596
Filing Date	January 25, 2002
First Named Inventor	Thomas S.Y. KO
Art Unit	1615
Examiner Name	James M. Spear
Attorney Docket Number	Q68257

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

Client knowingly and freely assents to termination of employment and case has been transferred to another firm.

CORRESPONDENCE ADDRESS

- ☐ The correspondence address is NOT affected by this withdrawal.
- ☒ Change the correspondence address and direct all future correspondence to:

Pfizer Inc.
235 East 42nd Street
New York, NY 10017

- ☐ This request is made on behalf of myself and
- ☐ all the attorneys/agents of record,
 - ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
 - ☒ the attorney/agents associated with Customer Number

WASHINGTON OFFICE

23373

CUSTOMER NUMBER

This request is enclosed in triplicate (including any attachments).

Name Susan J. Mack

Signature

Susan J. Mack

Reg. No. 30,951

Date

May 18, 2009

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.